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IN THE SPECIFICATION:

Please amend paragraph 21 of the specification as follows:

[0021]

For each patient 20, an electronic medical record (EMR) 80 is maintained. EMR 80 is an electronic patient file containing the relevant personal and medical data used to monitor, diagnose, evaluate and treat the patient 20. EMR 80 may be maintained by the physician 60, a particular clinic, hospital, insurance agency, central manager 110 or by the patient 20 themselves. Preferably, the patient 20 will have only one EMR 80 that is accessed by any physician 60 or caregiver treating or otherwise interacting with patient 20. More commonly, each institution (e.g., hospital, clinic, doctor) will have a separate EMR 80 for a given patient 8020.

Please amend paragraph 32 of the specification as follows:

[0032]

Referring to Figure 4, the data collected from the patient is stored (350) within a database at the central manager 110. Subsequently, the physician accesses (360) the physician portal 120 and reviews the information. As appropriate, the information reviewed may be directly added to the patient's EMR (370). That is, certain raw data may be added to the EMR based on standard practice (e.g., automatically added) or added based on the physician's request. The physician then analyzes (380) the data and comes to a conclusion. The resulting diagnosis and/or instructions are generated and delivered (390). This information is stored in the EMR (370). If prescriptions are provided by the physician, they may be automatically processed through participating pharmacies via an electronic prescription process (400). Alternatively, a prescription is uttimately provided to the patient and the patient has the prescription filled.

Please amend paragraph 33 of the specification as follows:

[0033]

Figure 5 is a flowchart that illustrates the step (390) of delivering the diagnosis in greater detail. As a result of the diagnosis, various follow up actions may be required and as such, personnel relevant to those actions are notified (420). For example, a follow-up appointment, testing, or examination may be required and an electronic communication may be sent to the administrative staff

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to arrange the required procedures. As another example, the IMD may need to be adjusted or replaced. Therefore, a procedure to reprogram the device may be scheduled or a procedure may be scheduled to surgically replace all or a portion of the device. Of course, the range of possible follow-up activities can vary from very simple to very complex and the parties notified will vary accordingly. Figure 8 illustrates some of the possible follow-up personnel (550) that may be notified. The EMR is updated (460) as appropriate.